

SERIAL NUMBER 09/456,300	FILING DATE 12/08/99	CLASS 386	GROUP ART UNIT 2712 2816	ATTORNEY DOCKET NO. 520.37971X00					
<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 10px;">APPLICANT</div> <div> <p>TAKASHI HASEGAWA, HACHIOJI, JAPAN.</p> <p>**CONTINUING DOMESTIC DATA***** VERIFIED <u>low</u> <u>none</u></p> <p>**371 (NAT'L STAGE) DATA***** VERIFIED <u>low</u> <u>none</u></p> <p>**FOREIGN APPLICATIONS***** VERIFIED JAPAN 10-351210 12/10/98 <u>low</u></p> <p>IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/24/00</p> </div> </div>									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;"> Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>low</u> <div style="display: flex; justify-content: space-between; font-size: small;"> Examiner's Initials Initials </div> </td> <td style="width:10%;"> STATE OR COUNTRY JPX </td> <td style="width:10%;"> SHEETS DRAWING 9 </td> <td style="width:15%;"> TOTAL CLAIMS \$18 </td> <td style="width:20%;"> INDEPENDENT CLAIMS 3 </td> </tr> </table>					Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>low</u> <div style="display: flex; justify-content: space-between; font-size: small;"> Examiner's Initials Initials </div>	STATE OR COUNTRY JPX	SHEETS DRAWING 9	TOTAL CLAIMS \$18	INDEPENDENT CLAIMS 3
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<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 10px;">TITLE</div> <div> AN AUTOMATIC BROADCAST PROGRAM RECORDER </div> </div>									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;"> FILING FEE RECEIVED \$760 </td> <td style="width:45%;"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: </td> <td style="width:40%;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </td> </tr> </table>					FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		
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